

Tennessee Natural Heritage Program

Rare Plant Species Survey Form

Species Name: _____

Survey Date: _____ **County Name:** _____

Quadname: _____ **Physiographic Province:** _____

Latitude: _____ **Longitude:** _____ **Elevation:** _____

(Note: If possible, attach a copy of the USGS 7.5' quadrangle with the location indicated)

Directions to the site: _____

Habitat Description: _____

Associated Species: _____

Population Data: _____

Name of Area: _____

Unmanaged; _____ **Managed;** _____ **by:** _____

Owner: _____

Contact: _____ **Phone:** _____

TDEC:

**Threats or Evidence of
Disturbance:** _____

Name: _____

Address: _____

Phone: _____ **Date:** _____

MAIL TO:
Tennessee Department of Environment and Conservation
Division of Natural Heritage
401 Church St., 14th Floor L&C Tower
Nashville, TN 37243-0447
(615) 532 - 0439 Secretary
(615) 532 - 0231 FAX